



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Nathan G. Clark, et al.

Attorney Docket: 990471U2

Serial No.:

09/810,792

Group Art Unit: 3641

Filed:

March 16, 2001

Examiner: Nelson, Peter A.

For:

OIL WELL PERFORATOR LINER WITH HIGH PROPORTION OF HEAVY METAL

DECLARATION UNDER 37 CFR 1.132

Assistant Commissioner for Patents Box Non-Fee Amendments Washington, DC 20231

Sir:

1. My name is David Leidel, I am over 21 years of age, and competent to make this Declaration.

- 2. I am employed at Halliburton Energy Services, Inc. and am a joint inventor of U.S. Patent No. 6,470,804 to Leidel, issued October 29, 2002, and a joint inventor of the application presently pending before the U.S. Patent and Trademark Office, Serial Number 09/810,792, filed March 16, 2001. I conceived and invented the subject matter of the 6,470,804 patent.
- 3. All statements herein are based on personal knowledge and are true and correct. I make this Declaration under penalty of perjury and subject to 18 USC 1001.

Dated this 29th pof April, 2003.

David J. Leidel

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PTO/SB/21 (05-03) Approved for use through 04/30/2003. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 09/810,792 TRANSMITTAL Filing Date 03/16/2001 **FORM** First Named Inventor Nathan G. Clark Art Unit (to be used for all correspondence after initial filing) 3641 Examiner Name Peter A. Nelson Attorney Docket Number Total Number of Pages in This Submission 990471U2USA **ENCLOSURES** (Check all that apply) After Allowance communication Fee Transmittal Form Drawing(s) to Group Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to Group Х Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Х Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Terminal Disclaimer Extension of Time Request Identify below): Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Remarks Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Individual name Crutsinger & Booth by Peter V. Schroeder Signature Date May 16, 2003 CERTIFICATE OF TRANSMISSION/MAILING

Response to Missing Parts under 37 CFR 1.52 or 1.53

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Virginia Born Date Signature May 16, 2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

*	Substitute for Form PTO-875									09/810,792		
CLAIMS AS FILED – PART I (Column 1) (Column 2)								SMALL E	ENTITY	OR	OTHER THAN SMALL ENTITY	
	FOR		NUMBER FILED		NUMBI	NUMBER EXTRA		RATE	FEE		RATE	FEE
	IC FEE CFR 1.16(a))			1				s	OR		\$	
TOT	AL CLAIMS CFR 1.16(c))		minus 20 =					x \$ =		OR	x \$=	
INDE	PENDENT CLAIM	vis .									x \$ =	
(37 0	(37 CFR 1.16(b)) minus 20 = *							x \$=		OR	<u> ^*</u>	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								+\$=		OR	+\$=	
* If the difference in column 1 is less than zero, enter *0" in column 2.								TOTAL		OR	TOTAL	
	C	LAIN	IS AS AME	ENDED	– PART II							
	(Column 1) (Column 2) (Column 3)						SMALL ENTITY		OR		R THAN ENTITY	
AMENDMENT A		RE	CLAIMS EMAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•		Minus	**	=		x \$=		OR	× \$=	_
	Independent (37 CFR 1.18(b))	*		Minus	494	=		x \$ =		OR	× \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+s =		OR	+ 5 =	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(C	olumn 1)		(Column 2)	(Column 3)						-
AMENDMENT B		RE	CLAIMS EMAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	35	Minus	** 37	= 0		x \$ =		OR	x \$=	0
	Independent (37 CFR 1.16(b))	•	3	Minus	3	= 0		x \$=		OR	x \$=	0
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$=		OR	+\$=	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
L		(0	olumn 1)		(Column 2)	(Column 3)						
MENDMENT C		RE	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.18(c))			Minus	**	=		x \$=		OR	× \$=	
	Independent (37 CFR 1.18(b))	•		Minus	***	=	1	× \$=		OR	× \$=	
1 =							1					

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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TOTAL

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